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CONFIRMATION NO. 2262

<b>SERIAL NUMBER</b> 10/673,329	<b>FILING OR 371(c) DATE</b> 09/30/2003 <b>RULE</b>	<b>CLASS</b> 702	<b>GROUP ART UNIT</b> 2857	<b>ATTORNEY DOCKET NO.</b> UFRF-0062/UF-11021
<b>APPLICANTS</b> James Chris Sackellares, Gainesville, FL; Leonidas D. Iasemidis, Scottsdale, AZ; Deng-Shan Shiau, Gainesville, FL; Linda Dance, Gainesville, FL;				
<b>** CONTINUING DATA *****</b> This appln claims benefit of 60/414,364 09/30/2002 <i>MC</i> <b>** FOREIGN APPLICATIONS *****</b> <i>None, MC</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> ** 12/18/2003				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met Verified and <i>Allowance</i> Acknowledged <i>Examiner's Signature</i> <i>MC</i> <i>Initials</i>		<b>STATE OR COUNTRY</b> FL	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 24
		<b>INDEPENDENT CLAIMS</b> 3		
<b>ADDRESS</b> 23377				
<b>TITLE</b> Multi-dimensional multi-parameter time series processing for seizure warning and prediction				
<b>FILING FEE RECEIVED</b> 476	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	